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IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF
TWIN FALLS

IN RE THE GENERAL ADJUDICATION OF RIGHTS TO
THE USE OF WATER FROM THE COEUR D'ALENE-
SPOKANE RIVER BASIN WATER SYSTEM

CIVIL CASE NUMBER: 49576

Ident. Number: 95-9117

Date Received: 10/22/2009

Receipt No: N022572

Received By:

AMENDED
NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED
UNDER STATE LAW

1. Name of Claimant(s)

PINEVIEW ESTATES WATER Phone:(208) 683-0500
DISTRICT
PO BOX 1177
HAYDEN ID 83835

2. Date of Priority: 3/6/2002

3. Source: GROUND WATER Tributary to:

4. Point of Diversion:

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4 of 1/4</u>	<u>Lot</u>	<u>County</u>	<u>Type</u>
51N	04W	11	SE NE		KOOTENAI	

5. Description of diverting works:

6. Water is used for the following purposes:

<u>Purpose</u>	<u>From</u>	<u>To</u>	<u>C.F.S.</u>	<u>(or) A.F.A</u>
MUNICIPAL	1 / 1	12/31	1.11	0

7. Total Quantity Appropriated is: 1.11 C.F.S. and/or 0 A.F.A

8. Non-irrigation uses:

9. Place of use:

95-9117

5/21/2012

SCANNED
AUG 02 2017

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
51N	04W	11	SE NE		MUNICIPAL	
			NE SE		MUNICIPAL	
					Section Acres	

<u>Township</u>	<u>Range</u>	<u>Section</u>	<u>1/4 of 1/4</u>	<u>Lot</u>	<u>Use</u>	<u>Acres</u>
51N	04W	12	SE SW		MUNICIPAL	
			SW SW		MUNICIPAL	
			SW NW		MUNICIPAL	
			SE NW		MUNICIPAL	
			NE SW		MUNICIPAL	
			NW SW		MUNICIPAL	
					Section Acres	
					Total Acres	

10. Place of use in counties: KOOTENAI

11. Do you own the property listed above as place of use? Yes

12. Other Water Rights Used:

13. Remarks:

Priority date description:

Description of use: Water Use
MUNICIPAL

Description
Water Service for 161 homes.

14. Basis of Claim: License

15. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Coeur d'Alene-Spokane River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

For Individuals: I/We do solemnly swear or affirm under penalty or perjury that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

For Organizations: I do solemnly swear or affirm under penalty or perjury that I am

WATER SYSTEM OPERATOR of PINEVIEW ESTATES WATER DISTRICT
Title Organization

That I have signed the foregoing document in the space below as

WATER SYSTEM OPERATOR of PINEVIEW ESTATES WATER DISTRICT
Title Organization

and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent [Signature] Date: 8-2-17

Title and Organization WATER SYSTEM OPERATOR, PINEVIEW ESTATES WATER DISTRICT
Please print name